

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Boulevard, Suite 605 • Baltimore Maryland 21230-1719

(410) 537-3315 • 1-800-633-6101 • http:// www. mde. state. md. us

SOLID WASTE MANAGEMENT INSPECTION FORM – LANDFILL OPERATIONS

GENERAL INFORMATION

Site Name: **Site B Municipal Landfill Vertical Expansion**

Date: **07/29/2015** Time In: **10:10 AM** Time Out: **12:30 PM**

Location: **9031 Reichs Ford Road**

County: **Frederick**

Permit # **2013-WMF-0582**

Permittee: **The Board of County Commissioners of Fred. Co.**

Field Conditions: **dry**

Weather: **76°F, cloudy**

LANDFILL OPERATIONS	Y	N/A	N
1. A statement of days and hours of operation is posted at the facility entrance.	<u>X</u>	___	___
2. A sign at the gate notifies passersby to call MDE if the red light alarm from leachate collection system is turned on.	___	<u>X</u>	___
3. Solid waste unloading is restricted to the working face, or other areas as approved (e.g., household dropoff areas).	<u>X</u>	___	___
4. If required, a third-party waste checker is present.	___	<u>X</u>	___
5. If household dropoff area or other approved alternative acceptance area is in place, it is used and maintained in accordance with approved plans.	<u>X</u>	___	___
6. The current operating cell is: <u>2 and 3</u>			
7. Bulk liquids are not accepted.	<u>X</u>	___	___
8. Containerized liquids, except for household wastes, are not accepted.	<u>X</u>	___	___
9. If needed, wastes are tested for free liquids using the EPA paint filter method.	<u>X</u>	___	___
10. If sewage sludge is used, handled, stored, or disposed of, it is done in accordance with a separate sewage sludge permit.	<u>X</u>	___	___
11. Tires are excluded from burial.	<u>X</u>	___	___
12. If applicable, tires are handled in accordance with scrap tire regulations and license.	<u>X</u>	___	___
13. Special handling requirements for friable asbestos are complied with.	<u>X</u>	___	___
14. Loads of separately collected yard waste are not accepted unless for composting or mulching.	<u>X</u>	___	___
15. If natural wood waste is being recycled:			
a. Operation is conducted in accordance with the O&M manual or other approved plans.	___	___	___
b. Applicable requirements of COMAR 26.04.09 (NWW Recycling) are complied with.	___	___	___
16. If white goods or refrigerators are accepted, refrigerants are properly removed prior to burial.	___	___	___
17. Wastes prohibited by permit are not accepted.	<u>X</u>	___	___
18. Waste is spread in uniform layers.	<u>X</u>	___	___
19. Waste is compacted to smallest practicable volume.	<u>X</u>	___	___
20. Lifts do not exceed 8 feet in height, unless otherwise authorized.	<u>X</u>	___	___

LANDFILL OPERATIONS	Y	N/A	N
21. Daily or periodic cover:			
a. Is applied within the required time period.	<u>X</u>	___	___
b. Is at least 6 inches thick, if earth is used, or	<u>X</u>	___	___
c. Is an approved ADCM or operational variant used in accordance with approved plans.	<u>X</u>	___	___
d. Covers wastes adequately to control vectors, fires, odors, blowing litter, and scavenging.	<u>X</u>	___	___
e. Does not contain free liquids or putrescibles, create a dust or odor problem, attract or harbor vectors, or impede compaction.	<u>X</u>	___	___
22. Disease vectors are prevented or controlled.	<u>X</u>	___	___
23. Grading and drainage:			
a. Minimizes runoff onto fill area.	<u>X</u>	___	___
b. Prevents ponding and erosion in fill area.	<u>X</u>	___	___
c. Drains water from surface of landfill.	<u>X</u>	___	___
24. Intermediate cover:			
a. Is applied within 1 month of lift completion.	___	___	___
b. Is at least 1 foot thick, if earth is used, or	___	___	___
c. Is an approved operational variant used in accordance with approved plans.	___	<u>X</u>	___
d. Covers wastes completely.	___	___	___
25. Final cover:			
a. Is applied within 90 days of area completion.	___	___	___
b. Is at least 2 feet thick.	___	___	___
c. Is clean earth.	___	___	___
d. Covers wastes completely.	___	___	___
*26. Slopes and other areas are stabilized adequately.	<u>X</u>	___	___
27. Sediment and erosion are controlled adequately.	<u>X</u>	___	___
28. Run-on and run-off controls required by 40 CFR Part 258.26 are in place.	<u>X</u>	___	___
29. Leachate outbreaks are prevented.	<u>X</u>	___	___
30. If not, leachate outbreaks are controlled.	___	<u>X</u>	___
31. Leachate is collected, stored, treated, and disposed of in accordance with approved plans.	<u>X</u>	___	___
32. Leachate is not discharged, recirculated, or treated on site without prior approval from MDE.	<u>X</u>	___	___
33. Scavenging or salvaging is not conducted, except as authorized in approved O&M manual.	___	<u>X</u>	___
34. Landfill gas and odors are controlled.	<u>X</u>	___	___
35. Unauthorized traffic and dumping are prevented by artificial or natural barriers.	<u>X</u>	___	___

Items continuing in noncompliance: _____ Items corrected: 26 Compliance assistance items: 26

INSPECTOR

NAME Anna Craig

TITLE Sanitarian III PHONE (410) 537-3315

SIGNATURE *A. Craig*

PERMITTEE'S REPRESENTATIVE

NAME Phil Harris

TITLE Superintendent PHONE 301 600 1815

SIGNATURE *Phil Harris*



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SOLID WASTE MANAGEMENT INSPECTION FORM – ALL SOLID WASTE ACCEPTANCE FACILITIES

THIS FORM CONTAINS CONDITIONS APPLICABLE TO ALL SOLID WASTE ACCEPTANCE FACILITIES.

IT SHOULD BE USED IN CONJUNCTION WITH ANOTHER INSPECTION FORM DESIGNED FOR THE SPECIFIC TYPE OF FACILITY BEING INSPECTED.

GENERAL INFORMATION

Site Name: **Site B Municipal Landfill Vertical Expansion**

Date: **07/29/2015** Time In: **10:10 AM** Time Out: **12:30 PM**

Location: **9031 Reichs Ford Road**

County: **Frederick**

Permit # **2013-WMF-0582**

Permittee: **The Board of County Commissioners of Fred. Co.**

Field Conditions: **dry**

Weather: **76°F, cloudy**

STANDARD CONDITIONS	Y	N/A	N	STANDARD CONDITIONS	Y	N/A	N
1. Facility is under direct supervision of a responsible person at all times.	<input checked="" type="checkbox"/>			19. For new facilities or new construction, a construction schedule is submitted to MDE within 3 months of permit issuance.		<input checked="" type="checkbox"/>	
2. All incoming loads are inspected for unacceptable wastes.	<input checked="" type="checkbox"/>			20. No material modification to the facility or operating plans has been made without written approval.	<input checked="" type="checkbox"/>		
3. Unacceptable wastes are removed and disposed of properly.	<input checked="" type="checkbox"/>			21. Records of required monitoring activities and results are kept for 5 years in an approved place.	<input checked="" type="checkbox"/>		
4. Personnel and equipment are adequate for proper construction or operation of the facility.	<input checked="" type="checkbox"/>			22. Any required pollution control systems, including sediment and stormwater basins, are installed and maintained in accordance with approved plans and applicable regulations.	<input checked="" type="checkbox"/>		
5. Essential equipment is repaired or replaced within 24 hours.	<input checked="" type="checkbox"/>			23. Sediment and stormwater basins are cleaned out when required.	<input checked="" type="checkbox"/>		
6. All-weather access roads are provided to disposal area and to any required monitoring devices.	<input checked="" type="checkbox"/>			24. Any required monitoring wells or other pollution monitoring devices are installed and maintained in accordance with approved plans and regulations.	<input checked="" type="checkbox"/>		
7. Tracking of soil, ash, or waste onto public roads is prevented.	<input checked="" type="checkbox"/>			25. Leachate is not discharged, except to sanitary sewer lines, without authorization from MDE.	<input checked="" type="checkbox"/>		
8. Vehicles are cleaned if needed to prevent tracking.				26. If any point source discharge of pollutants exists, it is permitted.	<input checked="" type="checkbox"/>		
9. Public access to facility is controlled.	<input checked="" type="checkbox"/>			27. Any pollutants from the handling of wastes or spills are collected and disposed of properly.	<input checked="" type="checkbox"/>		
10. Gates are locked when facility is unattended.	<input checked="" type="checkbox"/>			28. Upon permanent cessation of operations, facility is closed in a manner that prevents erosion, health and safety hazards, nuisances, and pollution.		<input checked="" type="checkbox"/>	
11. Pollution, public health hazards, and nuisances are prevented.	<input checked="" type="checkbox"/>			29. Upon permanent closure, all solid wastes not properly disposed of are transferred to a permitted facility for proper disposal.		<input checked="" type="checkbox"/>	
12. Wastes are not burned, except as authorized.		<input checked="" type="checkbox"/>					
13. Fire control and prevention measures are in place.	<input checked="" type="checkbox"/>						
14. Fuel storage and dispensing areas free of spills.	<input checked="" type="checkbox"/>						
15. Fuel spills, if any, are cleaned up immediately.	<input checked="" type="checkbox"/>						
16. Dispersion of dust is controlled.	<input checked="" type="checkbox"/>						
17. Dust control agents other than water are not used without written approval from MDE.	<input checked="" type="checkbox"/>						
*18. Blowing litter is controlled.	<input checked="" type="checkbox"/>						

Items continuing in noncompliance: _____ Items corrected: _____ Compliance assistance items: _____

***Comments:** A routine inspection was completed. I spoke with Lori Finafrock (Frederick County) before and after the inspection. The following was observed at the time of the inspection:

- Overall operations and conditions are satisfactory.
- Litter is controlled; litter was not observed off-site. However, litter is present on the ground surface of cell 2 as associated with a stockpile of "overs" (mulch and plastic rejects). COMAR 26.04.07.03B(4) prohibits disposing of solid waste in an open dump. Dumped, littered, and windblown refuse shall be collected and properly disposed (COMAR 26.04.07.03; Refuse Disposal Permit Part V.J; O&M Manual, 1994).
- Landfill cell boundaries (operating Cells 2 and 3) were not observed to be marked with durable posts around the boundary every 250 feet. The facility shall verify placement of exterior/interior cell markings and comply with Part III.B.3 of the Permit.

Operating without a permit or license or in violation of a permit or law may result in the assessment of civil or administrative penalties. Each day a violation occurs is a separate violation. (Note: photographs taken).

INSPECTOR	PERMITTEE'S REPRESENTATIVE
NAME <u>Anna Craig</u>	NAME <u>Phil Harris</u>
TITLE <u>Sanitarian III</u> PHONE <u>(410) 537-3315</u>	TITLE <u>Superintendent</u> PHONE <u>301 600 1845</u>
SIGNATURE <u>[Signature]</u>	SIGNATURE <u>[Signature]</u>

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SOLID WASTE MANAGEMENT INSPECTION FORM – PROCESSING FACILITIES

GENERAL INFORMATION

Site Name: **Site B Processing Facility and Transfer Station**

Date: **07/29/2015** Time In: **~11:25 AM** Time Out: **~12:00 PM**

Location: **9031 Reichs Ford Road**

County: **Frederick**

Permit # **2011-WPT-0604**

Permittee: **Board of County Commissioners of Frederick County**

Field Conditions: **dry**

Weather: **~76°F, cloudy**

GENERAL CONDITIONS

- | | Y | N/A | N |
|--|-------------------------------------|-------------------------------------|--------------------------|
| 1. Waste types are limited to those specified in the permit application and supporting documents. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Prohibited wastes are not accepted. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. If appliances or white goods are received, refrigerants are properly removed. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Separate loads of yard waste are not accepted unless composting or mulching is provided. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Scrap tires are not accepted without authorization. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Scrap tires are handled in accordance with scrap tire regulations and license. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Sewage sludge is not accepted without a permit. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Wastes are handled in accordance with the permit application and supporting documents. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. All waste handling activities are conducted in an enclosed building, or other approved area. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Tipping and unloading areas are constructed of impervious and readily cleanable material. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Drains from tipping area are connected to a sanitary sewer system. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| *12. Unloading is restricted to approved areas. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Wastes may be easily monitored and handled with available equipment during unloading. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Truck wheel curbs are provided to prevent vehicles from backing into refuse pit. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Odors are controlled. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Tipping or unloading areas are regularly cleared of refuse. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Tipping or unloading areas are regularly washed and disinfected to control off-site odors. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. No wastes remain on the tipping floor, in the refuse pit, or in uncovered trailers at end of work day. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Any waste remaining at end of day is stored in leak-proof, fly-proof, and rodent-proof containers. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Facility maintenance is clean and sanitary. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Plumbing and wastewater disposal devices are maintained properly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Floors are well drained and free of standing water. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Areas adjacent to the building are free of litter and standing water. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Grass is neatly trimmed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. The building is adjacent to a paved access road capable of handling loaded vehicles. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

OTHER CONDITIONS FROM COMAR

- | | Y | N/A | N |
|---|-------------------------------------|-------------------------------------|--------------------------|
| 26. Scavenging or salvaging is not conducted, unless as authorized by MDE. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 27. If scavenging or salvaging is occurring, then: | | | |
| a. The O&M manual clearly describes the process and safety precautions. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Areas for this activity are clearly designated. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 28. All solid waste is confined to the unloading area, unless otherwise authorized. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29. Waste is not stored or deposited adjacent to the facility, except in approved containers. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 30. Facility has emergency operation plan to provide for alternative disposal when facility is inoperative. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31. Sanitary facilities are provided for the employees, and are kept clean and in good repair. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32. Wastes not being processed are confined to the unloading area, unless otherwise authorized. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 33. Accumulation of solid waste is controlled to minimize odors and nuisances, and to prevent infestation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 34. Arrangement with local fire department will provide additional fire control equipment in emergencies. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 35. Days and hours of operation are posted at entrance | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 36. Macerators, hammer mills, and grinders are cleanable and equipped with drains to sewer system. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 37. For composting operations: | | | |
| a. Finished compost is non-pathogenic. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Finished compost is free of offensive odors. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Finished compost is biologically and chemically stable. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Finished compost is free of injurious components or particles. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Vectors are controlled by appropriate measures. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 38. Annual report is submitted on schedule. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 39. Annual report includes all required information. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

FACILITY SPECIFIC CONDITIONS

- | | | | |
|---|-------------------------------------|--------------------------|--------------------------|
| 40. Facility operates during daylight hours only, during approved hours of operation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 41. Emergency conditions requiring after-hours work are reported to MDE. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 42. Quantity of waste accepted does not exceed the permitted limit. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 43. Other facility specific permit conditions are met. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Items continuing in noncompliance: _____ Items corrected: _____ Compliance assistance items: 12

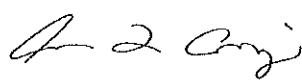
Comment: A routine inspection was completed. I spoke with Lori Finafrock (Frederick County) before and after the inspection. The following was observed or discussed: Overall conditions were satisfactory; Item 12 - Lori Finafrock stated that the facility has submitted to MDE (Martha Hynson) a request to change operations to allow all passenger vehicles at all times to unload solid waste at the transfer station building.

Operating without a permit or license or in violation of a permit or law may result in the assessment of civil or administrative penalties.

Each day a violation occurs is a separate violation.

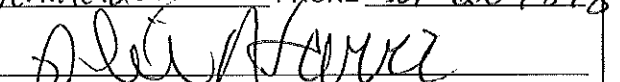
INSPECTOR

NAME: Anna Craig, Sanitarian II
PHONE 410-537-3315

SIGNATURE 

PERMITTEE'S REPRESENTATIVE

NAME Ph. I. Harris
TITLE superintendent PHONE 301-660-1848

SIGNATURE 



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SCRAP TIRE INSPECTION FORM – GENERAL AND SECONDARY COLLECTION FACILITIES

GENERAL INFORMATION

Facility Name: Frederick County Landfill

Date: 07-29-2015 Time In: ~11:00 AM Time Out: ~12:00 PM

Location: 9031 Reichs Ford Road

County: Frederick

License # 2013-RSC-09071 General Secondary X

Licensee: Frederick County Government

Facility Telephone Number: 301-600-2923

Weather: 76°F, cloudy

OPERATIONS

- | | Y | N/A | N |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Facility has a valid scrap tire collection license. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Scrap tire collection area is free of combustibles. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Collection area is free of ignition sources, such as cutting, welding, and heating devices, or open fires. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Pollution, health hazards, and nuisances from scrap tire operation are prevented. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Tires are free of infestation by insects or rodents. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Fuel storage and dispensing areas are free of spills. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Current scrap tire quantity is within licensed maximum number. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Licensed maximum number is <u>1,500</u> . | | | |
| 9. Estimated current number is <u>300-400</u> . | | | |

RECORD KEEPING

- | | Y | N/A | N |
|---|-------------------------------------|--------------------------|--------------------------|
| 10. Required records are kept. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Records show the total type and quantity (by number or weight) of scrap tires received in each transaction. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Records show the total type and quantity of scrap tires transferred from the facility in each transaction. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Records show the total type and quantity of scrap tires remaining on site. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Records show each hauler who delivers scrap tires to or removes them from the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Records show the license number of each hauler. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Records show the quantity and type of scrap tires transported by each hauler. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Records show the destination of scrap tires removed from the facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Are the destinations known to be licensed? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Semi-annual Report is kept on site. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

HAULER INFORMATION

Current Hauler: Emanuel Tire Company

Hauler License #: 2013RTH08943

Hauler Address: _____

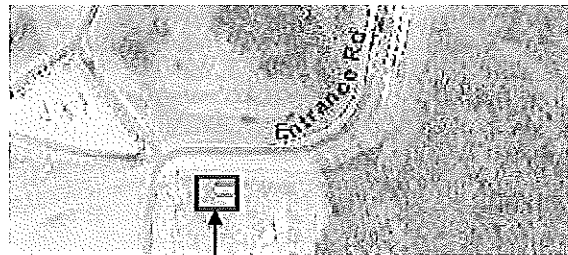
DESTINATION INFORMATION

Current Destination: Emanuel Tire Company

Destination License #, if known: 2010RPC02949

Destination Address: _____

COLLECTION AREA:



Scrap Tires

CORRECTIONS NEEDED: n/a

Items corrected since previous inspection: _____

Compliance assistance items: _____

INSPECTOR

NAME: Anna Craig, Sanitarian III
PHONE 410-537-3315

SIGNATURE

LICENSEE'S REPRESENTATIVE

NAME Phil Harris

TITLE Superintendent

SIGNATURE



